STATE OF NEW HAMPSHIRE

2018 Statement of Income and Expenses for LOBBYISTS (RSA Chapter 15)

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JAN 3 0 2019

PLEASE PRINT

NEW HAMPSHIRE DEPARTMENT OF STATE

1. Name of Lobbyi	st(s) James J. Bia	nco, Ir : Kathy Cor	ey Fox	DEPARTMENT OF	
		rm or corporation, if a	•		
P	Bianco Profession	al Association		•	
	Name of partnership, fi			<u> </u>	
18 C	entre Street	Concord	NH	03301	
	(Street)	(Town/City)	(State)	(Zip Code)	
(603) 225-7170)	(603) 226-0165	e-mail attvs(@biancopa.com	
(Telephone	e)	(Fax			
reportable expens	e transactions whic	h are not attributable	to any one client).	may file a separate report for	
X All reportable t	ransactions occurrin	g in the months prior to	the reporting date relative t	o the following client:	
		of Insurance and Fin			
	(Full Name of Cl	lient as it appears on the L	obbyist Registration Form)		
OR .□ All reportable t unrelated to any pa		obbyist (including the lo	obbyist's family), or the lobb	oying firm listed below which are	
IV. Date of Report Reports cover: a	t April 25, 2018 activity from date of re		July 25, 2018		
	October 31, 20 activity from 7/1/1		January 30, 2019 activity from 10/1/18 to 1		
V. There have b If this box is check Concord, NH 0330	ed, complete just thi	red and no reportabl s form and submit it to t	e transactions made sine the Secretary of State's Office	ce the last report. Ce. State House, Room 204,	
VI Check if addit	tional reports are a	ttached:			
	•		file Addendum A- Fees ar	nd Expenses	
☐ If you have pa Expense Reimburs	id an honorarium or sement	reimbursed expenses, y	ou must tile Addendum B-	- Report of Honorariums or	
☐ If you, your fir	rm, or your family h	as made political contri	butions, you must file Adde	endum C- Political Contribution	
I have read RSA I	/Affirmation by Lo 5. RSA 15 B. BSA ic pest of my knowle	14-C and RSA 664 and	hereby swear or affirm that	the foregoing information is true	
	VVA.		January	30, 2019	
(Signature of lobb	oyig()	 -		(Date)	
James J. Biand	co, Jr.				
(Print Name of lo					

STATE OF NEW HAMPSHIRE



E A S E

> P R

Lobbyists Fees and Expenses Addendum A

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(RSA Chapter 15:6)

JAN 3 0 2019

NEW HAMPSHIRE DEPARTMENT OF STATE

I. Name of Lobbyist(s) James J. Bianco, Jr. : Kathy Corey Fox	DEPARTMENT OF
II. Name of lobbyist's partnership, firm or corporation, if any:	
Bianco Professional Association	
(Name of partnership, firm or corporation)	
III. Name of Client Coalition of Insurance and Financial Producers	Date 1/30/2019
IV. Fees Received Indicate the gross amount of all fees received from the client identified above to lobbying, including fees for services such as public advocacy, government including research, monitoring legislation, and related legal work. The groreduced by any expenses:	relations, or public relations service
a) Total of all fees received in this reporting period	a) \$ 4,210
b) Total of all fees received this calendar year, prior to this reporting period (This should equal the total of all prior monthly reports for this calendar ye	b) \$ 27,791
Total of all fees received to date (Add lines a and b)	c) \$ <u>32,000</u>
d) Indicate the amount of any such fees that are due, but have not yet been paid	d) \$ <u>160</u>
V. Expenses: Lobbyist(s)/Lobbying partnerships, firms, or corporations are required to repfees. Separate reports are to be filed for expenditures made relative to each of the lobbyist(s)/firm that are unrelated to any one client a separate report of Expenses are to be reported in one of three categories of expenses: (a) the during the reporting period for salaries, benefits, support staff, and office exindividual expenses where the expenditure was of \$25.00 or less (for example lunch where the cost was \$25.00 or less, purchase of a pen with a value of lessing lobbied, purchase of a ceremonial object given to a person being lobbie (c) an itemized statement of each individual expenditure made during this report any purpose not covered by (a) (for example: purchase of a meal with value ceremonial object to be given to the subject of lobbying with a value greate restaurant expenses for a legislative reception). Expenses for honorariums contributions will be reported on separate addendums and should not be reported.	may be filed for the lobbyist(s)/firred aggregate total of all expenses paragress; (b) the aggregate total of all expenses; (b) the aggregate total of alle: meals purchased during a business than \$10 that is given to the personal with a value of \$25.00 or less); are orting period of greater than \$25.00 for the of greater than \$25, purchase of the er than \$25, but not greater than \$5, expense reimbursement, or political
a) Total aggregate expenses for this reporting period for salaries, benefits, support staff, and office expenses, related directly or indirectly to lobbying.	a) \$ 6,314
b) Total aggregate of expenditures during this reporting period, not reported in a), of \$25 or less.	b) \$ 0
c) Total of all itemized expenditures reported in detail in section VI.	c) \$ <u>0</u>

d) Total expenses for this reporting period (Add lines a, b and c)	d) \$ 6,315
e) Total of expenses paid this calendar year, prior to this reporting period (This should be the amount on line f of addendum A for last month's report)	e) \$ 25,846
f) Total of all expenses year to date	n \$ <u>32,160</u>
VI. Other Expenses: Provide the following detail for all expenditures of more than \$25 made from leperiod, including by whom paid or to whom charged.	obbying fees during this reporting
Paid to:	Amount:
	\$
	\$
	\$
	\$
	\$
	s

Sworn Statement/Affirmation by Lobbyist	
I have read RSA 15, RSA 15-B and RSA 664 and hereby swear or affir	m that the foregoing information
is true and complete to the best of my knowledge and belief.	
	1/30/2019
(Signature of lobbyist)	(Date)
James J. Bianco, Ir	
(Print Name of lobbyist)	

State of New Hampshire Signature Form for Associated Lobbyist RSA Chapter 15

Use this form to swear or affirm the truth and completeness of Income and Expense Statements and related Addendums.

JAN 3 0 2019 NEW HAMPSHIRE DEPARTMENT OF STATE

Sworn Statement/Affirmation by Lobbyist Statement of Income and Expenses for:

Name of Lobbying partnership, firm, or	corporation:	Bianco Profes	sional Association	
Name of Client (leave blank if Stateme	nt is for the par	rtnership, firm, o	r corporation and not related	d to any
particular client): Coalition of Insura	nce and Final	ncial Producers		
Date of Report (check one):				
April 25, 2018 July 25, 2018	□ Octob	oer 31, 2018 🗆	January 30, 2019 🗖	
I have read RSA 15, RSA 15-B, RSA the following Addendums submitted wasubmitted):			•	
Addendum A(s).				
Addendum B(s).				
Addendum C(s).				
I hereby swear or affirm that the foregon complete to the best of my knowledge a (Signature of loobyist)	_		ent and each Addendum is t nuary 30, 2019 (Date)	rue and
(Signature of 1000yist)			(Date)	
Kathy Corey Fox				
(Print Name of lobbyist)				